L11000125224

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COVER LETTER

TO: Registration Section	
Division of Corporations	
SUBJECT: Hyperponic LLC	
(Name of Limite	ed Liability Company)
The enclosed member, resignation or dissociate	ion and fee(s) are submitted for filing.
Please return all correspondence concerning th	nis matter to:
Jennifer Kearney	
(Contact Person)	
Hyperponic	
(Firm/Company)	
901 34th AVE N, #76525	
(Address)	
St. Petersburg, FL 33734	
(City/State and Zip Code)	
For further information concerning this matter	, please call:
Jennifer Kearney	at (954) 599-1439
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to \$\Bigsirem\$ \$25 Filing Fee	the Florida Department of State for: ☐ \$55 Filing Fee & Certified Copy
Mailing Address:	Street Address:
Registration Section	Registration Section
Division of Corporations P.O. Box 6327	Division of Corporations The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

CR2E079 (2/14)

Tallahassee, FL 32314



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

DISSOCIATION OR RESIGNATION OF MEMBER, MANAGER FROM FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

(Pursuant to 605.0216, Florida Statutes)

1. The name of the	limited liability company as	it appears on the rec	cords of the Flo	orida Department
of State is: Hyper	ponic ELC			·
2. The Florida docu	ment/registration number ass	signed to this limite	d liability comp	pany is:
L11000125224			•	
3. The date this me	mbedmanager withdrew/resig	gned or will withdra	aw/resign is: M	lay 10, 2023
4. [Doug Fyvolent		, hereby withdr	raw resign is a	
(Print N	ame of Person Resigning)			
Manager				
	(Print Title)			
of this limited lial resignation in wri	pility company and affirm the ting.	limited liability co	ompany has bee	n notified of my
	7-18			$S_i = S_i$
Signature of Di	ssociating Member or Resign	ing Manager		MH 7:52
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)			52